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2019 Partnership General Information Name and Address Information Employer ID number Legal Name of Entity DBA (Doing business as) In care of Address Suite # City 10 U.S. ONLY: State, ZIP, County Foreign ONLY: Province/State, Country, 12 13 Postal Code 14 Phone number **Other Information General Information** 15 A Principal business activity Resident state 16 32 B Principal product or service Misc code 1 17 33 Misc code 2 C Business code number 18 34 E Business start date Invoice # 35 Mark applicable boxes: Preparer fee 36 Initial return Final return Amended return Firm # 22 24 37 Address change Name change Preparer # 38 Accounting method: Data entry operator # 25 39 Cash ERO# Accrual Other 47 Κ Aggregated activities for section 465 at-risk purposes **Entity Name Control** 48 Use this field only if Name Control is Grouped activities for section 469 passive activity purposes

	· ·			•	* ' '		abtained from IDC by contacting Dysiness	
If not a calendar year:						obtained from IRS by contacting Business & Specialty Help Line at 1-800-829-4933.		
Fiscal	I year beginning	28						
Fiscal	I year ending	29						
30	52-53 week tax	year electi	on					
Client information								
Email	41							
Cell	42	Fax	43					
QBI								
44	Specified Service Trade or Business (SSTB)							

Business Aggregation Number (BAN)

Potential Bussiness Aggragation Number (PBAN)

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